* required field

Submit

Cancel

C	Create External	User F	Request for	Action .	ADJ AI	DJ12031731	I - JONATHAN	N SHOCKLEY

questor Details								
Request Type	OTOC	Opposing Party Position	Agree					
Requestor Last Name	Kweller	Case #	ADJ12031731					
Requestor Type	Applicant	Requestor First Name	Zachary					
Phone Area Code	510	Phone	4442512					
Fax Area Code	819	Fax	6169					
Email Address	samantha@pacificworkers.cc	Scheduled Hearing Date	12/17/2020					
I represent that I have made a good faith effort to notify all interested parties of this request planation APPLICANT FILED FOR AN EXPEDITED HEARING IN ORDER TO OBTAIN AUTHORIZATION FOR TREATMENT FOR THE NECK.								
quest								
REQUEST TO TAKE MATTER OFF CALENDAR.								
ason (Please specify in detail)								
CARRIER HAS AUTHORIZED TREATMENT FOR THE NECK SO THERE ARE NO ISSUES PENDING.								

A copy of this request for action shall be served by the requestor on all interested parties.